U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update Annual Plan for Fiscal Year: October 1, 2001

VAN HOUSING AUTHORITY

Van, Texas

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

| PHA Name: Van Housing Authority |
|---|
| PHA Number: TX344v01 |
| PHA Fiscal Year Beginning: (mm/yyyy) 10/01/01 |
| PHA Plan Contact Information: |
| Name: Judy Nations Phone: 903/963-7001 TDD: Email (if available): jn1@gte.net |
| Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) |
| ✓ Main administrative office of the PHA☐ PHA development management offices |
| Display Locations For PHA Plans and Supporting Documents |
| The PHA Plans (including attachments) are available for public inspection at: (select all that apply) |
| Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below) |
| PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below) |
| PHA Programs Administered: |
| □ Public Housing and Section 8 □ Section 8 Only □ Public Housing Only |

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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|---|--------|
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| Attachment D: Resident Membership on PHA Board or Governing Body | |
| Attachment E: Membership of Resident Advisory Board or Boards Attachment: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text) | |
| ☑ Other (List below, providing each attachment name) | |
| Attachment F: Component 3, (6) Deconcentration and Income Mixing | |
| Attachment G: Performance and Evaluation Report | |
| Attachment H: Five Year Progress Report Update on Goals | |

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

The Van Housing Authority is a provider of low cost homes

For those unable to find adequate or affordable housing, and we will assist residents in achieving selfsufficiency and upward mobility.

Our residents and others shall be treated with dignity and respect, and we will continually strive to improve the quality of life for all residents of the community.

We are dedicated to achieving our organizational objectives through the pride and commitment to excellence by the board of commissioners and staff.

Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Van Housing Authority has not made nor intends to make any major policy or program changes in 2001. Community Service Policy and our family Pet Policy have already been implemented.

No comments were needed on safety.

| 2. Capital Improvement Nec |
|----------------------------|
|----------------------------|

| 2. Capital Improvement Needs |
|--|
| [24 CFR Part 903.7 9 (g)] |
| Exemptions: Section 8 only PHAs are not required to complete this component. |
| A. ⊠Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan? |
| B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$\frac{60,126.00}{} |
| C. ☑Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component. |
| D. Capital Fund Program Grant Submissions |

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment B

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment C

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HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

| 3. Demolition ar [24 CFR Part 903.7 9 (h)] | |
|---|---|
| Applicability: Section 8 of | only PHAs are not required to complete this section. |
| 1. ☐ Yes ⊠ No: | Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.) |
| 2. Activity Description | n |
| | Demolition/Disposition Activity Description |
| | activities Associated with HOPE VI or Conversion Activities) |
| 1a. Development nan | ne: |
| 1b. Development (pro | |
| 2. Activity type: Den | |
| Dispos | |
| 3. Application status | |
| Approved | |
| | nding approval |
| Planned appli | |
| | oproved, submitted, or planned for submission: (DD/MM/YY) |
| 5. Number of units af | |
| 6. Coverage of action | |
| <u>-</u> | e development |
| Total dev | • |
| | es (select all that apply) |
| Section 8 | |
| Public hou | |
| | e for admission to other public housing or section 8 |
| Other hou | 1 |
| 8. Timeline for activ | ě , |
| | projected start date of activity: |
| · | projected start date of relocation activities: |
| · | nd date of activity: |
| <u> </u> | |
| 4. Voucher Hom | eownership Program |
| [24 CFR Part 903.7 9 (k)] | |
| _ (/) | |
| A. ☐ Yes ☒ No: | Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.) |

Small PHA Plan Update Page 4

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

| B. Capacity of the PHA to Administer a Section 8 Homeownership Program |
|--|
| The PHA has demonstrated its capacity to administer the program by (select all that apply): |
| Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources |
| Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards |
| Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): |
| 5. Safety and Crime Prevention: PHDEP Plan |
| [24 CFR Part 903.7 (m)] Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. |
| A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? |
| B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ |
| C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component. |
| D. Yes No: The PHDEP Plan is attached at Attachment |
| 6. Other Information 24 CFR Part 903.7 9 (r)] |
| A. Resident Advisory Board (RAB) Recommendations and PHA Response |
| 1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? |
| 2. If yes, the comments are Attached as Attachment (File name) |
| 3. In what manner did the PHA address those comments? (select all that apply) |
| The PHA changed portions of the PHA Plan in response to comments A list of these changes is included |

| | ☐ Yes ☐ No: below or |
|---------------|--|
| | Yes No: at the end of the RAB Comments in Attachment |
| | Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment |
| X | Other: (list below)Residents approved the plan as is. |
| | t of Consistency with the Consolidated Plan ble Consolidated Plan, make the following statement (copy questions as many times as necessary). |
| 1. Consolidat | ted Plan jurisdiction: (provide name here) |
| | State of Texas |
| | has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan sdiction: (select all that apply) |
| × | The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. |
| | The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. |
| | The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. |
| | Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below) |
| | Other: (list below) |
| 3. PHA Req | uests for support from the Consolidated Plan Agency |
| _ Yes⊠ N | No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 mos important requests below: |
| | olidated Plan of the jurisdiction supports the PHA Plan with the following actions and itments: (describe below) |
| A. | Promote adequate and affordable housing |
| В. С. | Promote economic opportunity Promote a suitable living environment without discrimination. |
| ℃. | 1 10111000 a suitable fixing city ironnicht without discrimination. |

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

Substantial Deviation from the 5-year Plan:

Any change to Mission statement such as:

50% deletion from or addition to the goals and objectives as a whole

50% or more decrease in the quantifiable measurement of any individual goal or objective.

No changes have been made at this time

B. Significant Amendment or Modification to the Annual Plan:

50% variance in the funds projected in the Capital Fund Program Annual Statement.

Any Increase or decrease over 50% in the funds projected in the Financial Resource statement and/or the Capital Fund Program annual Statement

Any change in a policy or procedure that requires a regulatory 30-day posting

Any submission to HUD that requires a separate notification to residents, such as Hope VI, Public Housing Conversion, Demolition/Disposition, designated Housing or Homeownership programs.

Added work item to test for materials containing asbestos

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| List of Supporting Documents Available for Review | | | | | | |
|---|---|---|--|--|--|--|
| Applicable & On Display | & | | | | | |
| X | PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans | | | | |
| X | State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update) | 5 Year and Annual Plans | | | | |
| X | Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans | | | | |
| X | Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction | Annual Plan: Housing Needs | | | | |
| X | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources | | | | |
| X | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | |
| N/A | Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | |
| N/A | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | |
| X | Public housing rent determination policies, including the method for setting public housing flat rents Check here if included in the public housing A & O Policy | Annual Plan: Rent Determination | | | | |
| X | Schedule of flat rents offered at each public housing development Check here if included in the public housing A & O Policy | Annual Plan: Rent Determination | | | | |
| N/A | Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination | | | | |

| List of Supporting Documents Available for Review | | | | | | |
|---|--|--------------------------------------|--|--|--|--|
| Applicable | Supporting Document | Related Plan | | | | |
| & | | Component | | | | |
| On Display | Dublic housing management and maintaneous malicular annual to | Annual Plan: | | | | |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest | Operations and | | | | |
| | infestation (including cockroach infestation) | Maintenance | | | | |
| X | Results of latest binding Public Housing Assessment System | Annual Plan: | | | | |
| Λ | (PHAS) Assessment | Management and | | | | |
| | (THE) TISSESSMENT | Operations | | | | |
| N/A | Follow-up Plan to Results of the PHAS Resident Satisfaction | Annual Plan: | | | | |
| | Survey (if necessary) | Operations and | | | | |
| | | Maintenance and | | | | |
| | Scored 91.6% | Community Service & | | | | |
| | | Self-Sufficiency | | | | |
| N/A | Results of latest Section 8 Management Assessment System | Annual Plan: | | | | |
| | (SEMAP) | Management and | | | | |
| | | Operations | | | | |
| N/A | Any required policies governing any Section 8 special housing | Annual Plan: | | | | |
| | types | Operations and | | | | |
| | check here if included in Section 8 Administrative | Maintenance | | | | |
| X | Plan | A 1 D1 C : | | | | |
| X | Public housing grievance procedures | Annual Plan: Grievance Procedures | | | | |
| | ☐ check here if included in the public housing | Procedures | | | | |
| | A & O Policy | | | | | |
| N/A | Section 8 informal review and hearing procedures | Annual Plan: | | | | |
| | check here if included in Section 8 Administrative | Grievance Procedures | | | | |
| | Plan | | | | | |
| X | The HUD-approved Capital Fund/Comprehensive Grant Program | Annual Plan: Capital | | | | |
| V | Annual Statement (HUD 52837) for any active grant year | Needs | | | | |
| X | Most recent CIAP Budget/Progress Report (HUD 52825) for any | Annual Plan: Capital Needs | | | | |
| N/A | active CIAP grants Approved HOPE VI applications or, if more recent, approved or | Annual Plan: Capital | | | | |
| 11/71 | submitted HOPE VI Revitalization Plans, or any other approved | Needs | | | | |
| | proposal for development of public housing | rvecus | | | | |
| N/A | Self-evaluation, Needs Assessment and Transition Plan required | Annual Plan: Capital | | | | |
| | by regulations implementing §504 of the Rehabilitation Act and | Needs | | | | |
| | the Americans with Disabilities Act. See, PIH 99-52 (HA). | | | | | |
| N/A | Approved or submitted applications for demolition and/or | Annual Plan: | | | | |
| | disposition of public housing | Demolition and | | | | |
| 27/: | | Disposition | | | | |
| N/A | Approved or submitted applications for designation of public | Annual Plan: | | | | |
| | housing (Designated Housing Plans) | Designation of Public | | | | |
| N/A | Approved or submitted assessments of reasonable revitalization of | Housing Annual Plan: | | | | |
| 1 N / PA | public housing and approved or submitted conversion plans | Conversion of Public | | | | |
| | prepared pursuant to section 202 of the 1996 HUD Appropriations | Housing | | | | |
| | Act, Section 22 of the US Housing Act of 1937, or Section 33 of | 110401118 | | | | |
| | the US Housing Act of 1937 | | | | | |
| N/A | Approved or submitted public housing homeownership | Annual Plan: | | | | |
| | programs/plans | Homeownership | | | | |
| N/A | Policies governing any Section 8 Homeownership program | Annual Plan: | | | | |
| | (sectionof the Section 8 Administrative Plan) | Homeownership | | | | |

| Applicable & | List of Supporting Documents Available for Rev Supporting Document | Related Plan |
|--------------|---|---|
| On Display | | Component |
| N/A | Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies | Annual Plan: Community Service & Self-Sufficiency |
| N/A | FSS Action Plan/s for public housing and/or Section 8 | Annual Plan: Community Service & Self-Sufficiency |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E | Annual Plan: Community Service & Self-Sufficiency |
| N/A | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports | Annual Plan: Community Service & Self-Sufficiency |
| N/A | The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report | Annual Plan: Safety and Crime Prevention |
| N/A | PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. | Annual Plan: Safety and Crime Prevention |
| X | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) Check here if included in the public housing A & O Policy | Pet Policy |
| X | The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit |
| | Troubled PHAs: MOA/Recovery Plan | Troubled PHAs |
| | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |

ATTACHMENT B **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary Grant Type and Number TX21P34450201 PHA Name: Van Housing Authority Federal FY of Grant: Capital Fund Program: CFP 2001 Capital Fund Program Replacement Housing Factor Grant No: **⊠**Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: Final Performance and Evaluation Report Performance and Evaluation Report for Period Ending: Line | Summary by Development Account **Total Estimated Cost Total Actual Cost** No. Revised **Expended Original Obligated** Total non-CFP Funds 1406 Operations 1408 Management Improvements 4.500.00 1410 Administration 2,619.00 1411 Audit 1415 liquidated Damages 1430 Fees and Costs 19,599.00 1440 Site Acquisition 8 1450 Site Improvement 1460 Dwelling Structures 10 33,408.00 1465.1 Dwelling Equipment—Nonexpendable 11 1470 Nondwelling Structures 12 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 1498 Mod Used for Development 1502 Contingency 19 Amount of Annual Grant: (sum of lines 2-19) 20 60.126.00 Amount of line 20 Related to LBP Activities 21 Amount of line 20 Related to Section 504 Compliance 23 Amount of line 20 Related to Security Amount of line 20 Related to Energy Conservation Measures

ATTACHMENT B

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

| PHA Name: Van Housing Authority | | Grant Type and Number Capital Fund Program #: TX21P34450201 Capital Fund Program | | | | Federal FY of Grant: 2001 | | |
|---------------------------------|---|--|----------|----------------------|---------|---------------------------|-------------------|--------------------|
| | | | | | | | | |
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX344-001 | | | | | | | | |
| | Complete work item – Replace roofing with new | 1460 | | 33,408.00 | | | | |
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ATTACHMENT B

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

| PHA Name: Van Housing Authority | | Grant Type and Number Capital Fund Program #: TX21P34450201 Capital Fund Program | | | | Federal FY of Grant: 2001 | | | | | | | | | | | |
|---------------------------------|---|--|--|----------|---------|---------------------------|----------|------|-------------|-----------------------------------|---------------|------------------|----------------------|--|-------------------|--|--------------------|
| | | | | | | | | | | 1 | | Housing Factor # | | | | | |
| | | | | | | | | | Development | General Description of Major Work | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Proposed |
| Number | Categories | | | | | | | | | | | | | | | | |
| Name/HA-Wide | | | | Original | Revised | Funds | Funds | Work | | | | | | | | | |
| Activities | | | | | | Obligated | Expended | | | | | | | | | | |
| TX344-HA | | | | | | | | | | | | | | | | | |
| | Hire a consultant to assist with annual | 1408 | | 2,000.00 | | | | | | | | | | | | | |
| | plan | | | | | | | | | | | | | | | | |
| | Provide funds for training for Executive | 1408 | | 2,500.00 | | | | | | | | | | | | | |
| | Director | | | | | | | | | | | | | | | | |
| | Hire non technical help | 1410 | | 1,819.00 | | | | | | | | | | | | | |
| | Provide funds for sundry items | 1410 | | 800.00 | | | | | | | | | | | | | |
| | Hire an on-site inspector | 1430 | | 2,728.00 | | | | | | | | | | | | | |
| | Hire an architect to prepare plans and specifications | 1430 | | 7,071.00 | | | | | | | | | | | | | |
| | Provide funds for reproduction of prints | 1430 | | 800.00 | | | | | | | | | | | | | |
| | Test for material containing asbestos | 1430 | | 9,000.00 | | | | | | | | | | | | | |
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ATTACHMENT B

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

| PHA Name: Van Housing Authority | | | Type and Nun | | | | Federal FY of Grant: 2001 |
|---------------------------------|----------|----------------|----------------|-------------------|--------------------|--------|----------------------------------|
| | | | ıl Fund Progra | m#: TX21P344 | 50201 | | |
| | | Capita | ıl Fund Progra | m Replacement Hou | using Factor #: | | |
| Development Number | All | Fund Obligate | ed | A | ll Funds Expended | l | Reasons for Revised Target Dates |
| Name/HA-Wide | (Qua | art Ending Dat | te) | (Q | uarter Ending Date | e) | |
| Activities | _ | | | | | | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| TX344-001 | 9/30/03 | | | 9/30/04 | | | |
| ТХ344-НА | 9/30/03 | | | 9/30/04 | | | |
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Capital Fund Program Five-Year Action Plan Part I: Summary

| DIIA Van Hausing Aut | | | | Moning of F Veen Dive | |
|---------------------------|-----------|---------------------------|---------------------------|--|---------------------------|
| PHA Van Housing Authority | | | | ☑Original 5-Year Plan ☐Revision No: | |
| D1 | 37 1 | W-d-St-tCV2 | W1-Ct-tt-CW2 | | West-Clarkson of Convers |
| Development | Year 1 | Work Statement for Year 2 | Work Statement for Year 3 | Work Statement for Year 4 | Work Statement for Year 5 |
| Number/Name/HA- | | FFY Grant: 2002 | FFY Grant: 2003 | FFY Grant: 2004 | FFY Grant: 2005 |
| Wide | | PHA FY: 2002 | PHA FY: 2003 | PHA FY: 2004 | PHA FY: 2005 |
| | Annual | | | | |
| | Statement | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TX344-001 | | 44,908.00 | 42,908.00 | 44,908.00 | 36,408.00 |
| | | | | | |
| TV244 II A | | 15 210 00 | 17.210.00 | 15 210 00 | 22.719.00 |
| ТХ344-НА | | 15,218.00 | 17,218.00 | 15,218.00 | 23,718.00 |
| | | | | | |
| | | | | | |
| CFP Funds Listed for | | 60,126.00 | 60,126.00 | 60,126.00 | 60,126.00 |
| 5-year planning | | | | | |
| Replacement Housing | | | | | |
| Factor Funds | | | | | |

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

| Activities for Year 1 | | Activities for Year: 2 FFY Grant: 2002 PHA FY: 2002 | | Activities for Year: 3 FFY Grant: 2003 PHA FY: 2003 | | | | |
|--------------------------|----------------------------|---|----------------|---|--|-----------------------|--|--|
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | | |
| See | | | | | | | | |
| Annual | TX344-001 | | | TX344-001 | | | | |
| Statement | | Purchase new refrigerators and ranges | 23,700.00 | | Complete Work Item - Replace existing flooring in elderly units and install new composition vinyl flooring | 6,271.00 | | |
| | | Replace existing lighting in kitchen area from fluorescent to standard bulbs | 5,250.00 | | Install new security storm doors on all units | 25,680.00 | | |
| | | Paint exterior of units | 6,450.00 | | Install new vent-a-hoods | 10,957.00 | | |
| | | Replace existing flooring in elderly units and install new composition vinyl flooring | 9,508.00 | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | Total CFP I | Estimated Cost | \$44,908.00 | | | \$42,908.00 | | |

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

| | PP | | | A -1: '1' C \(\bar{V} \bar{F} \) | | | | |
|--------------------------|---|---|----------------|-----------------------------------|---|-----------------------|--|--|
| Activities for Year 1 | Activities for Year : 4 FFY Grant: 2004 | | | | Activities for Year: 5 FFY Grant: 2005 | | | |
| r car r | | PHA FY: 2004 | | | PHA FY: 2005 | | | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | | |
| See | | | | | | | | |
| Annual | TX344-001 | | | TX344-001 | | | | |
| Statement | | Construct a gazebo for the resident's use. | 23,876.00 | | Install new playground and new equipment for the resident's children | 18,965.00 | | |
| | | Replace counter tops, sinks and fixtures with new | 11,460.00 | | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures and site improvements etc.) and other accouterments | 10,543.00 | | |
| | | Install benches for the resident's use. | 2,400.00 | | Install ceiling fans in all units (2 per unit) | 6.900.00 | | |
| | | Paint interior of units | 7,172.00 | | , | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Total CFP 1 | Estimated Cost | \$44,908.00 | | | \$36,408.00 | | |

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

| Activities for | | Activities for Year: 2 | | | Activities for Year: 3 | |
|----------------|----------------------------|---|-----------------------|----------------------------|---|-----------------------|
| Year 1 | | FFY Grant: 2002 | | | FFY Grant: 2003 | |
| | | PHA FY: 2002 | | | PHA FY: 2003 | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost |
| See | | | | | | |
| Annual | ТХ344-НА | Hire a consultant to assist with plan | 2,000.00 | ТХ344-НА | Provide funds for training | 2,000.00 |
| Statement | | Hire non technical help | 1,819.00 | | Hire a consultant to assist with plan | 2,000.00 |
| | | Provide funds for sundry items | 800.00 | | Hire non technical help | 1,819.00 |
| | | Hire an on-site inspector | 2,728.00 | | Provide funds for sundry items | 800.00 |
| | | Hire an architect to develop plans and specifications | 7,071.00 | | Hire an on-site inspector | 2,728.00 |
| | | Provide funds for reproduction of prints | 800.00 | | Hire an architect to develop plans and specifications | 7,071.00 |
| | | | | | Provide funds for reproduction of prints | 800.00 |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | Total CFP | Estimated Cost | \$15,218.00 | | | \$17,218.00 |

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

| Activities for Year 1 | Activities for Year : 4 FFY Grant: 2004 PHA FY: 2004 | | | Activities for Year: 5 FFY Grant: 2005 PHA FY: 2005 | | | |
|-----------------------|--|---|-------------------|---|---|-----------------------|--|
| | Development Name/Numbe r | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | ТХ344-НА | | | ТХ344-НА | | | |
| Statement | | Hire a consultant to assist with plan | 2,000.00 | | Upgrade software | 3,500.00 | |
| | | Hire non technical help | 1,819.00 | | Hire a consultant to assist with plan | 2,000.00 | |
| | | Provide funds for sundry items | 800.00 | | Hire non technical help | 1,819.00 | |
| | | Hire an on-site inspector | 2,728.00 | | Provide funds for sundry items | 800.00 | |
| | | Hire an architect to develop plans and specifications | 7,071.00 | | Hire an on-site inspector | 2,728.00 | |
| | | Provide funds for reproduction of prints | 800.00 | | Hire an architect to develop plans and specifications | 7,071.00 | |
| | | | | | Provide funds for reproduction of prints | 800.00 | |
| | | | | | Purchase new computer and printer | 5,000.00 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | Total C | FP Estimated Cost | \$15,218.00 | | | \$23,718.00 | |

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

| Section 1: General Information/History A. Amount of PHDEP Grant \$ B. Eligibility type (Indicate with an "x") C. FFY in which funding is requested D. Executive Summary of Annual PHDEP P | N1 N2_ Plan | R | |
|---|--|--|--|
| In the space below, provide a brief overview of the PHDE outcomes. The summary must not be more than five (5) s | | s of major initiatives or a | activities undertaken. It may include a description of the expected |
| | | | rill be conducted), the total number of units in each PHDEP Target get Area. Unit count information should be consistent with that |
| | | | 1 |
| PHDEP Target Areas (Name of development(s) or site) | Total # of Units within the PHDEP Target Area(s) | Total Population to be Served within the PHDEP Target Area(s) | |
| | | | |

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

| 12 Months | 18 Months | 24 Months |
|-----------|-----------|-----------|
|-----------|-----------|-----------|

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

| Fiscal Year of Funding | PHDEP Funding Received | Grant # | Fund Balance as of Date of this Submission | Grant Extensions or Waivers | Grant Start Date | Grant Term End Date |
|---------------------------|------------------------------|---------|--|-----------------------------------|---------------------|------------------------|
| FY 1995 | | | | | | |
| FY 1996 | | | | | | |
| FY 1997 | | | | | | |
| FY1998 | | | | | | |
| FY 1999 | | | | | | |

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary
Enter the total amount of PHDEP funding allocated to each line item.

| FFY | PHDEP Budget Summary |
|--------------------------|----------------------|
| Original statement | |
| Revised statement dated: | |

| Budget Line Item | Total Funding |
|---|---------------|
| 9110 – Reimbursement of Law Enforcement | |
| 9115 - Special Initiative | |
| 9116 - Gun Buyback TA Match | |
| 9120 - Security Personnel | |
| 9130 - Employment of Investigators | |
| 9140 - Voluntary Tenant Patrol | |
| 9150 - Physical Improvements | |
| 9160 - Drug Prevention | |
| 9170 - Drug Intervention | |
| 9180 - Drug Treatment | |
| 9190 - Other Program Costs | |
| | |
| TOTAL PHDEP FUNDING | |

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

| 9110 - Reimbursement of Law Enforcement | | | | Total PHDEP Funding: \$ | | | |
|---|---------------------------|----------------------|---------------|------------------------------|-----------------------|--------------------------------------|------------------------|
| Goal(s) | | | | | , | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDE P Funding | Other Funding (Amount/ Source) | Performance Indicators |
| 1. | Serveu | | | Date | rununig | Source) | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9115 - Special Initiative | Total PHDEP Funding: \$ |
|---------------------------|-------------------------|
| | |

| Goal(s) | | | | | | | |
|---------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------------|------------------------|
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount/ Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9116 - Gun Buyback TA Match | | | | | Total PHDEP Funding: \$ | | | |
|-----------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |

| 9120 - Security Personnel | | | | | Total PHDEP Funding: \$ | | |
|---------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9130 – Employment of Investi | gators | Total PHDEP Funding: \$ | | | | |
|------------------------------|--------|-------------------------|--|--|--|--|
| Goal(s) | | | | | | |
| Objectives | | | | | | |

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
|---------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|-----------------------------------|------------------------|
| 1. | Berveu | | | Date | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9140 – Voluntary Tenant Patrol | | | | | Total PHDEP Funding: \$ | | |
|--------------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|
| Goal(s) | | | | | 11 | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9150 - Physical Improvements | | | | | Total PHDEP Funding: \$ | | |
|------------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9160 - Drug Prevention | Total PHDEP Funding: \$ |
|------------------------|-------------------------|
| Goal(s) | |
| Objectives | |

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
|---------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------|------------------------|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9170 - Drug Intervention | | | | Total PHDEP Funding: \$ | | | |
|--------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|-----------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9180 - Drug Treatment | | | | | Total PHDEP Funding: \$ | | |
|-----------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|
| Goal(s) | | | | | | | |
| Objectives | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9190 - Other Program Costs | Total PHDEP Funds: \$ |
|----------------------------|-----------------------|
| Goal(s) | |
| Objectives | |

| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators |
|---------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------|-----------------------------------|------------------------|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

Required Attachment $\underline{\mathbf{D}}$: Resident Member on the PHA Governing Board

| 1.⊠ | No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2) | | | | | | |
|-----|--|--|--|--|--|--|--|
| A. | Name of resident member(s) on the governing board: | | | | | | |
| | LaDana Sullenbarger | | | | | | |
| B. | How was the resident board member selected: (select one)? ☐Elected ☑Appointed | | | | | | |
| C. | The term of appointment is (include the date term expires): | | | | | | |
| | 2 year term – 9/2000 till 9.2002 | | | | | | |
| 2. | A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): | | | | | | |
| В. | Date of next term expiration of a governing board member: | | | | | | |
| | September 2002 | | | | | | |
| C. | Name and title of appointing official(s) for governing board (indicate appointing official for the next position): | | | | | | |
| | Judy Nations, Executive Director and the Board members | | | | | | |

Required Attachment $\underline{E}:$ Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Barbara Alexander

Darlene Marrow

LaDana Sullenbarger

Approved the plan as is.

ATTACHMENT F: Deconcentration and Income Mixing

In accordance with the final rule 903(2)(b)(2) exempts "public housing developments operated by a PHA with fewer than 100 public housing units".

| ATT | ACHMENT G Annual Statement/Pe | erformance and Evalu | ation Report | | | | | | |
|---------------------------------|---|---|-----------------------|------------------|-------------------|--|--|--|--|
| Capi | ital Fund Program and Capital Fund P | rogram Replacement | Housing Factor | (CFP/CFPRHF) Par | t 1: Summary | | | | |
| PHA Name: Van Housing Authority | | Grant Type and Number TX211 | Federal FY of Grant: | | | | | | |
| | | Capital Fund Program: CFP | | | 2000 | | | | |
| | | Capital Fund Program Replacement Housing Factor Grant No: | | | | | | | |
| Ori | ginal Annual Statement | Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:) | | | | | | | |
| ⊠ _{Per} | formance and Evaluation Report for Period Ending: | Final Performance and Evaluation Report | | | | | | | |
| Line | Summary by Development Account | Total Estimat | ted Cost | Total Ac | Total Actual Cost | | | | |
| No. | | | | | | | | | |
| | | Original | Revised | Obligated | Expended | | | | |
| 1 | Total non-CFP Funds | | | | | | | | |
| 2 | 1406 Operations | | | | | | | | |
| 3 | 1408 Management Improvements | | | | | | | | |
| 4 | 1410 Administration | 3,385.00 | | | | | | | |
| 5 | 1411 Audit | | | | | | | | |
| 6 | 1415 liquidated Damages | | | | | | | | |
| 7 | 1430 Fees and Costs | 13,403.00 | | | | | | | |
| 8 | 1440 Site Acquisition | | | | | | | | |
| 9 | 1450 Site Improvement | | | | | | | | |
| 10 | 1460 Dwelling Structures | 42,147.00 | | | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | | | |
| 12 | 1470 Nondwelling Structures | | | | | | | | |
| 13 | 1475 Nondwelling Equipment | | | | | | | | |
| 14 | 1485 Demolition | | | | | | | | |
| 15 | 1490 Replacement Reserve | | | | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | | | | |
| 18 | 1498 Mod Used for Development | | | | | | | | |
| 19 | 1502 Contingency | | | | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2-19) | 58,935.00 | | | | | | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | | | | | | | | |
| 23 | Amount of line 20 Related to Security | | | | | | | | |
| 24 | Amount of line 20 Related to Energy Conservation | | | | | | | | |
| | Measures | | | | | | | | |

ATTACHMENT G

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

| PHA Name: Van H | Iousing Authority | Grant Type and Nu | Federal FY of Grant: 2000 | | | | | |
|----------------------------|--|--|---------------------------|-----------|------------|--------------------|-------------------|-----------------------|
| | | Capital Fund Progr Capital Fund Progr Replacement 1 | | | | | | |
| Development Number | General Description of Major Work Categories | escription of Major Work Dev. Acct No. Quantity Total Estimated Cost | | | mated Cost | Total Actual Cost | | Status of Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX344-001 | Replace existing roofing including decking and install new | 1460 | 30 du | 42,147.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
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ATTACHMENT G

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

| ousing Authority | Capital Fund Progr | Federal FY of Grant: 2000 | | | | | |
|---|--|--|---|---|--|--|--|
| General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost Original Revised | | Total Actual Cost | | Status of Proposed |
| | | | | | Funds Obligated | Funds Expended | Work |
| | 1.410 | | 2 202 00 | | | | |
| 1 | | | | | | | |
| • | | | | | | | |
| | | | | | | | |
| specifications | 1430 | | 7,839.00 | | | | |
| Provide funds for reproduction of prints | 1430 | | 1,818.00 | | | | |
| | | | | | | | |
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| | | | | | | | |
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| | | | | | | | |
| | General Description of Major Work Categories Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications | Capital Fund Progr Capital Fund Progr Replacement I General Description of Major Work Categories Dev. Acct No. Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications Capital Fund Progr Replacement I 1410 Dev. Acct No. 1410 1430 1430 | Capital Fund Program #: TX21P3-Capital Fund Program Replacement Housing Factor # General Description of Major Work Categories Dev. Acct No. Quantity Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications Capital Fund Program #: TX21P3-Capital Fund Program Replacement Housing Factor # 1410 1410 1430 1430 | Capital Fund Program #: TX21P34450100 Capital Fund Program Replacement Housing Factor #: General Description of Major Work Categories Dev. Acct No. Quantity Original Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications Capital Fund Program #: TX21P34450100 Postroid Fund Program #: TX21P34450100 Quantity Total Esting Original 1410 1,183.00 3,746.00 7,839.00 | Capital Fund Program #: TX21P34450100 Capital Fund Program Replacement Housing Factor #: General Description of Major Work Categories Dev. Acct No. Quantity Original Revised Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications Capital Fund Program #: TX21P34450100 Quantity Total Estimated Cost 1410 2,202.00 1,183.00 1,183.00 1,7839.00 | Capital Fund Program Replacement Housing Factor #: General Description of Major Work Categories Dev. Acct No. Original Original Revised Funds Obligated Hire non technical help Provide funds for sundry items Hire an on-site inspector Hire an architect to develop plans and specifications Capital Fund Program Replacement Housing Factor #: Original Acct No. Original Revised Funds Obligated 1410 1,183.00 3,746.00 7,839.00 | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |

ATTACHMENT G Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

| PHA Name: Van Housing Authority | | | Type and Nun | nber | | Federal FY of Grant: 2000 | |
|---------------------------------|--|---------------|--------------|-----------------------|-------------------|---------------------------|----------------------------------|
| | Capital Fund Program #: TX21P34450100 Capital Fund Program Replacement Housing Factor #: | | | | | | |
| | 1 | | | | | | |
| Development Number | | Fund Obligat | | | ll Funds Expended | | Reasons for Revised Target Dates |
| Name/HA-Wide | (Qua | art Ending Da | te) | (Quarter Ending Date) | | | |
| Activities | | | | | | | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| TX344-001 | 9/30/02 | | | 9/30/03 | | | |
| | | | | | | | |
| TX344-HA | 9/30/02 | | | 9/30/03 | | | |
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ATTACHMENT H: FIVE YEAR PROGRESS REPORT UPDATE ON GOALS

Reduce public housing vacancies: Our goal is to have all units occupied and through the continuation of modernization the dwelling units our goal will be achieved.

Improve public housing management: Train staff to fully understand and take advantage of opportunities in the new law and regulations to better serve our residents and the community.

Renovate or modernize public units: Always striving to improve units as necessary.

Implement public housing security improvements: Our goals are to achieve an open door policy and have the residents report any criminal activities to Van Housing Authority or report to local police department.

Promote self-sufficiency and asset development of assisted households: We do outreach, we help find services needed for our clients when we can, and we have good mixed economy.

Ensure Equal Opportunity in Housing for all Americans: We are doing this now.